OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

TLLINOIS ORIGINAL COMMERCE COMMISSION

(File this application via e-docket, or if unable to do so, file one original verified application with the Chief Clerk.)

Docket No.

Please provide the appropriate information in the () areas in the heading below.

Royal Phone Company LLC

Application for a certificate of local and interexchange authority to operate as a reseller of telecommunications services in the State of Illinois.

02-0235

APPLICATION FOR CERTIFICATE TO BECOME A TELECOMMUNICATIONS CARRIER

(Use additional sheets as necessary.)

GENERAL

1.	Applicant's Name(including d/b/a, if any)		FEIN#_	<u>36-4491172</u>
	Royal Phone Company LLC			
Αd	dress: Street 5887 Teal Lane		_	
Cit	y Long Grove	State/Zip IL 60047		
2.	Authority Requested: (Mark all that apply)	_ <u>X_</u> 13-403 Facilities E	ased Inter	exchange
		<u>X</u> 13-404 Resale of	Local and	or Interexchange
		X 13-405 Facilities	Based Loc	al
3.	Request for waivers/variances: In application 13-405, waivers of Part 710 and of Section 75 interexchange service authority under Section generally requested. Please indicate which we requesting each waiver/variance.	35.180 of Part 735 are genera ns 13-403 and 13-404, waiver	lly request s of Part 7	ed. In applications for 10 and Part 735 are
	X Part 710 Uniform Sy	stem of Accounts for Te	lecommu	nications Carriers
	Deposits, To	Soverning the Establishme ermination of Service and for Local Exchange Telec Illinois	l Issuanc	e of Telephone
	X Section 735.180 Directo	ories		
	Other			

- 4. For all applicants requesting local exchange authority under Section 13-404 or Section 13-405, please complete the following:
 - (a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in Appendix A of this document
 - (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in Appendix B of this document:
 - (c) the Financial Ouestions for Applicants Seeking Local Exchange Service Authority found in Appendix C of this document; and
 - (d) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document.
- 5. In what area of the state does the Applicant propose to provide service?

Applicant proposes to provide service throughout the State of Illinois.

- 6. Please attach a sheet designating contact persons to work with Staff on the following:
 - issues related to processing this application a)
 - b) consumer issues
 - customer complaint resolution c)
 - d) technical and service quality issues

For items a) through d) the contact person is:

Steve Hwang **Executive Vice President** 5887 Teal Lane Long Grove, IL 60047 Tel:(866) 769-2529 Fax: (647) 955-9587 Email: steve.hwang@royalphone.com

- "tariff" and pricing issues e)
- f) 9-1-1 issues
- g) security/law enforcement

For items e) through g) the contact person is:

Tae E. Kim **Executive Vice President** 5887 Teal Lane Long Grove, IL 60047 Tel: (866) 769-2529

Fax: (647) 955-9587

Email: tae.kim@royalphone.com

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

7.	Please check type of organization? Individual	Corporation				
	Individual Partnership	Date corporation was formed February 13 , 2002				
<u>X</u>	Other (Specify) Limited Liability	In what state? <u>Illinois</u> Company				
	S. Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois. See Exhibit A.					
9.	D. List jurisdictions in which Applicant is offering service(s).					
	Applicant is not currently offering	ng service in any jurisdiction.				
10	. Has the Applicant, or any principal revoked or suspended in any jurisdic	in Applicant, been denied a Certificate of Service or had its certification ction in this or another name?				
	YES (Please provide details) <u>X</u> NO				
11	. Have there been any complaints or j	udgements levied against the Applicant in any other jurisdiction?				
	YESXNO					
If	If YES, describe fully.					
	. Has Applicant provided service und YES <u>X</u> NO YES, please list.	er any other name?				
		nd records in Illinois? X YES NO Im Code Part 250 needs to be requested.				
M	ANAGERIAL					
14. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in either narrative form, resumes of key personnel, or a combination of these forms. See Exhibit B.						
15	. List officers of Applicant.					
	Tae E. Kim	Executive Vice President				
	Steve Hwang	Executive Vice President				

16.	Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services? YES X NO			
If Y	ES, list entity.			
17.	How will Applicant bill for its service(s)? (At a minimum, describe how often the Applicant will bill for service and details of the billing statement.)			
	The Applicant will render its own bills and send them directly to its customers on a monthly basis. Monthly billing statements will include call detail information, and separate line items for all services and charges, including any monthly recurring charges, one-time charges, taxes and surcharges.			
18.	How does Applicant propose to handle service, billing, and repair complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)			
	Applicant's customer service representatives are available to assist its customers with service, maintenance and billing issues. Specifically, Applicant's customer service representatives are prepared to respond to a broad range of service matters, including inquiries regarding: (1) the types of services offered by Applicant and the rates associated with such services; (2) monthly billing statements; (3) problems or concerns pertaining to a customer's current service; and (4) general telecommunications matters. For service and maintenance issues, customers may contact Applicant's Customer Services twenty-four (24) hours a day, seven (7) days a week, by calling toll-free 1-866-769-2529. For billing issues, customers may contact Applicant's Customer Services department between the hours of 7:00 a,m. and 7:00 p.m., Monday through Friday, by calling toll-free at 1-866-769-2529. Alternatively, customers may communicate billing questions or concerns to Applicant's customer services representatives in writing. Applicant will respond to any complaints within 24 hours and attempt to resolve any complaint within 48 hours. Escalation procedures for service related matters and complaints are included with every bill for services which includes notification that the customer may seek commission assistance.			
19.	Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing? X YES NO			
20.	What telephone number(s) would a customer use to contact your company?			
21.	Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act? X YESNO			
22.	Please describe applicant's procedures to prevent slamming and cramming of customers?			
	Applicant will comply with Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act to prevent slamming and cramming of customers. Applicant confirms all orders to change long distance service in accordance with one of four verification processes established by the FCC.			
23.	If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 735, 755, 756, 757, 770, and 772?			
	X YES NO (If no, please provide an explanation.)			

24. Is Applicant aware that it must file tariffs prior to providing service in Illinois?				
XNO				
FINANCIAL				
25. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service.				
Please see Exhibit C. Due to the confidential and proprietary nature of Applicant's financial information, Exhibit C has been filed under seal.				
TECHNICAL				
26. Does Applicant utilize its own equipment and/or facilities?YESXNO				
If YES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:				
Applicant currently does not have any facilities, but in the future may provide service through its own equipment collocated at ILEC central offices, through the use of unbundled network elements leased from other certificated carriers, and/or through the resale of the services of other carriers. Applicant also plans to construct its own switching and transmission facilities at a later date.				
If NO, which facility provider(s)'s services does the Applicant intend to use?				
Applicant intends to use the facilities of the incumbent local exchange carrier for local connection to customers, IXCs for access to long distance services, and CLECs to provide diverse and alternative network elements.				
27. Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).				
Applicant will provide interexchange and local exchange telecommunications services. Applicant will resell a full range of voice services, including local and long distance calling services, voicemail, and calling features. Data services will include both dial and broadband access to the Internet and related email and ecommerce applications. Applicant intends to provide its telecommunications services from points within the State of Illinois, to points of destination within the state of Illinois and other parts of the United States. Applicant intends to market its services primarily to residential customers and small to medium sized businesses.				
28. Will technical personnel be available at all times to assist customers with service problems?				

If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but no limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and			
method of receiving credit for faulty calls? YES	NO		
Not applicable. Applicant does not intend to provide payphone service. (Signature	of Applicant)		

VERIFICATION

This	application shall be verified under oath.	dent			
	OATH	Q.e.			
State of <u>Illinois</u>))ss	a Vice resident			
County of Cook)	Le Sita			
Steve Hwang Company LLC;	makes oath and says that he is	the of Royal Phone			
that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein.					
	Signature of affian	×M,			
Subscribed and sworn to before	me, a Notary Public/				
	zed to administer oaths)				
in the State and County above	named, this 35 day of March	, 2002.			
OFFICIAL SEAL STEVEN P PETERSON TARY PUBLIC STATE OF ILLINOIS COMMISSION EXP. NOV. 2,2004	Sto Plater				
(2	Signature of person authorized to adminis	ter oatn)			